



PARENTAL VERBAL ABUSE AND SOCIAL SUPPORT AS CORRELATES OF PSYCHOLOGICAL WELLBEING

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ABSTRACT

The society expects parents to have good and desired foundations for the child, which will enable the child learn and acquire proper and safe health of mind and actions. This study examined parental verbal abuse and social support as correlates of psychological well-being. One hundred and eighty seven (187) participants took part in the study comprising Ninety (90) male and ninety-seven (97) female drawn making use of convenience sampling method from the two main hostels of Caritas University Amorji-Nike, Emene, Enugu. Their age ranged between 18-27 years with a mean age of 23years and a standard deviation of 3.60. Three set of instruments were used in the study which are: The Ryff Scale of Psychological Well-Being (Ryff, 1989), Interpersonal Support Evaluation List (ISEL) (Cohen S., et al, 1985), and Parental Verbal Abuse scale developed by the researchers. Correlational research design was used while Pearson Product Moment Correlational Coefficient statistics result revealed that the dimensions of social support have significant positive relationships with psychological well-being at (Appraisal support, $r = .33$, $P < .01$, $r^2 = .11$; Belonging support $r = .48$, $P < .01$, $r^2 = .23$; and Tangible support $r = .47$, $P < .01$, $r^2 = .22$) respectively. This indicates that social support and psychological wellbeing increases and decreases at the same direction. Parental verbal abuse was also found to correlate negatively with psychological well-being at $r = -.71$, $p < .01$. The results also showed a significant interaction between parental verbal abuse and social support on psychological wellbeing, $F(4, 186) = 74.13$, $P < .01$. From the result it was clear to note that both social support and parental verbal abuse are implicated in psychological wellbeing. Thus, having access to adequate social support is essential to a healthy life for intellectual and social development while parental verbal abuse must be averted as much as possible because of its negative association with psychological wellbeing.

Keywords: *psychological health, aggression, parenting styles, wellbeing, family type.*

INTRODUCTION

The desire of every society is to have sound and competent youth both in mind and body. People who will ensure the progress and development in its entire ramification are the family; the first window through which a child sees the world, and the society as well. The society needs to disengage from all forms of incompetence and head towards a better society. However, parenting style are reversing the situation, if parents have a good and desired foundation for the child, adolescents will learn and acquire a proper and safe health of mind and actions.

Ryff (2002) believes that a good level of psychological wellbeing is critical to how people function. It helps them believe in and rely on the self. People with a sound psychological wellbeing persist longer and make more progress in the face of difficult task. According to Pavot and Diener (1993), psychological well-being refers to the subjective experience of two aspects of one's psychological experience: Emotional or affective experience (i.e., positive and negative affect) and, conceptual or cognitive experience (i.e., satisfaction with life, relationships, work, and leisure). Psychological well-being refers to positive mental health. Researches have shown that psychological well-being is a diverse multidimensional concept (MacLeond & Moore, 2000; Ryff, 1989b; Wissing & Van Eeden, 2002), which develops through a combination of emotional regulation, personal characteristics, identity and life experience. (Helson & Srivastava, 2001). Psychological well-being can increase with age, education, extraversion and consciousness and decrease with neuroticism (Keyes et al., 2002). In terms of gender, research has suggested that there is no significant difference between men and women on measures of psychological well-being (Roothman, Kirsten & Wissing, 2003). It has been proven times and again by numerous communities researcher that verbal abuse is



harmful to people and can be specially damaging to adolescent (Peterson, 1988). Verbal abuse can be as damaging to its victim as a physical blow and it can take longer to heal.

Parental verbal abuse is a message behaviour which can attack adolescents self concept in order to deliver psychological pain, at times not just pains (psychological pain) but a disruption in self-believe, confusion, low self-worth (Miller, 2006). The behaviour of parent can come from either the father or mother and even any member of the family, guardian and teacher/lecturers etc. Certain factors such as work frustration, unmet pressuring goals, a dislike for the child etc can be responsible for the action/behaviour of verbal abuse, unknown (sometimes to the victim). Parental verbal abuse is just an ordinary verbal attack on a child's emotional and social development and it is a basic threat to healthy human development and relationship (Egeland, 1999; Rohmer, 2004). Belittling a child allows a child to see him or herself in a way consistent with the care giver words. This limits the child's potentials by limiting the Child's own sense of his or her potentials. Peterson (2004) opined that children learn to interact with the world through their early interaction with their parents and close social relations, when this interaction is warm and loving, children grow to see the world as a secure place for exploration and efficient learning. When parents are cold to their children, they deprive the child of necessary ingredients for intellectual and social development. Children, who are subjected to consistent coldness, grow to see the world as cold, uninviting place, and will likely experience serious impaired relationships in the future. They may also never feel confident to explore, learn and face difficulty to have a positive relationship with others due to a low self worth, low meaning in life and feeling of purpose. Erikson (2001) stated that when parents teach children to engage in antisocial behaviour, the children grow up unfit for normal social experience.

Parental verbal abuse plays a significant role in both the moral and educational upbringing of a child. Verbal abuse was defined by Cahn and Lloyd (1996) as a verbal attack that attempt to inflict psychological pain thereby resulting to the child feeling less favourable about himself/herself, that means suffering a negative shift in psychological wellbeing. This means that parent who frequently use abusive words on their children create depression and anxiety in them. Kirk (2006) opined that humiliation, disrespect, unjustified criticism, yelling and threatening are all forms of parental verbal abuse that are commonly used on adolescents. Examples of verbal abuse according to Stone (1995) includes withholding, bullying, harassing, integrating, blaming, insulting, diverting, lying, taunting, threatening, name calling, yelling and ranging, saying negative comments about someone's choice, appearance, race, religion, ethnicity etc,

Musa (2001) stated that parental verbal abuse potentially has major economic implications for the society and children at large. Parents have ways of rationalizing verbal abuse "I am not physically hurting my child, so it can't be abuse", "every other parent does it, and so it can't be abuse". But no matter how parents rationalize it, the fact remains that verbal abuse towards children causes them to perceive themselves as less competitive, less comfortable with their own behaviour, and less worthy. Various forms of parental verbal abuse include competence attack, physical appearance attack, teasing, ridicule, threat, profanity, swearing, personality attack, disconfirmation, rejection, negative comparison and blame (Klimt, 2000). Whatever the category of verbal abuse, the message it conveys in the life of an adolescent pose a great threat to the adolescent adversely. Children have strong need for parents to care for them. According to Baumrind (1991) adolescents who experience parental verbal abuse are socially incompetent; they show poor self control and do not handle independent well. Lidoln (2005) also researched that it has the potentials to adversely affect student's economic outcome in adolescent via its impact on achievement in school (Canley, 2001). The behavioural theory by Watson and Skinner, (1972) stand on the view that behaviour is controlled by unconscious mental processes determined by parental relationship developed in early childhood. Behaviourists argue that a person's personality is learned throughout life during interaction with others.

Bandura, (1973) social learning theory suggests that children who grow up in a home where there is love and support or where violence is a way of life or verbal abuse is common may



learn to believe that such behaviour is accepted and rewarding even if parents do not tell them. Verbal abuse is a functional and learned behaviour. Bandura's theory of reciprocal determinism states that the child affects the environment and the environment affects the child during personality development. Social support not only helps in combating the effects of parental verbal abuse on the individual, it helps us to feel better and cope with challenges. It also leads to improved health, including physical health, psychological health, and overall wellbeing. This means that having access to adequate social support is essential to a healthy life and a well-being psychologically. Much research links social support to several health outcomes (Albrecht & Goldsmith, 2003; Cobb, 1976; Lyyra & Heikkinen, 2006; Motl, McAuley, Snook, & Gliottoni, 2009; Schaefer, Coyne, & Lazarus, 1981). Some of the many health outcomes of social support include psychological adjustment, improved efficacy, better coping with upsetting events, resistance to disease, reduced mortality. From these benefits it is said that social support helps an individual who has lost meaning to life to be saved from suicidal actions, a loss of self, low self-worth, confusion. It enables an individual to see that parental verbal abuse is merely from the dark side of the parent or the surrounding factors of the abuser, which has caused such abuse; as someone else somewhere particularly the one providing the social support, sees a light, worth in him/her. Stress and Coping Social Support Theory by Cohen and Wills, (1985) dominates social support research and explains the buffering model. According to this theory, social support prevents people from the bad health effects of stressful events (i.e., stress buffering) by influencing how people think out and cope with the event (appraisal) and cope ineffectively, coping consists of deliberate, conscious actions such as problem solving or relaxation. As applied to social support, stress and coping theory suggests that social support promotes adaptive appraisal. According to Schaefer, Coyne, and Lazarus (1981) there are five types of social support. The emotional support is communication that meets an individual's emotional and affective needs. These are expressions of care and concern. The esteem support is communication that bolsters an individual's self-esteem or beliefs in their ability to handle a problem or perform a needed task. The network support is communication that affirms individuals' belonging to a network or reminds people that they are not alone in whatever situation they are facing. The information support is communication that provides useful or needed information. The tangible support is any physical assistance provided by others. This can range from making a meal for someone who has been denied food to paying the persons' transport fee. To appropriately adapt supportive messages, individuals must consider their relationship to the person in distress, the situation or extent of the problem, how much control the person has over the situation, and the emotional undertones of the situation (MacGeorge, Clark, & Gillihan, 2003).

Hypotheses

1. There will be a significant relationship between parental verbal abuse and psychological wellbeing
2. There will be a significant relationship between social support and psychological wellbeing.
3. There will be a joint interaction between parental verbal abuse and social support on psychological wellbeing

METHODOLOGY

Design/Statistics

Correlational research design was adopted and Pearson Product Moment Correlation and Multiple regression statistics were applied to analyze the data in order to test the hypotheses.

Participants

A total of one hundred and eighty seven (187) participants comprising of ninety (90) male students and ninety-seven (97) female students were sampled for the study. The participants



were selected using convenience sampling method, from the population of undergraduate students of Caritas University Amorji-Nike, Emene, Enugu. These participants were drawn from the two main halls of residence in the university (St. Mary's and London Hostels for females and Emmanuel Hostel for males). Their age ranges between 18-27 years of age, a mean age of 23 years and a standard deviation of 3.60.

Instruments

Three set of instruments were used for data collection.

Ryff Scale of Psychological Well-Being (Ryff, 1989)

Psychological wellbeing measuring instrument is a theoretically grounded multidimensional model of wellbeing that was designed by Ryff (1989). It was developed to include and measure six distinct component of positive psychological functioning which are a) Positive self- regard (self acceptance), b) mastery of the surrounding environment, c) quality relationship with others, d) continued growth and development, e) purposeful living, and, f) the capacity of self determination (autonomy). The instrument has 6-point Likert response ranging from 1 to 6. They are 1 = "Strongly Disagree", 2 = "Moderately Disagree", 3 = "Slightly Disagree", 4 = "Slightly Agree", 5 = "Moderately Agree", 6 = "Strongly Agree". The scale has eighteen (18) items. Items; 1,4,8,15,16,17, and 18 are reversely scored, while items; 2,3,5,6,7,9,10,11,12,13, and 14 are directly scored. A sample item is "Some people wonder aimlessly through life, but I am not one of them". Higher scores on each scale indicate greater wellbeing on that dimension. The test-retest reliability coefficient of Ryff's Psychological wellbeing scale (RPWBS) was .82. The subscales of self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth were found to be .71, .77, .78, .77, .70, and .78 respectively. The Cronbach Alpha coefficient for the participants was .86 while for the sub scales are as follows: self acceptance = .73, positive relations with others = .80, autonomy = .64, environmental mastery = .79, purpose in life = .74, and personal growth = .81.

Interpersonal Support Evaluation List -12 (Cohen, Mermelstein, Kamarck, & Hoberman, 1985)

Interpersonal support evaluation list-12 by Cohen, et al., (1985) measures the perceived availability of social support. It is a 12-item scale, a shortened version of the original ISEL (40-item; Cohen & Hoberman, 1983). The scale has three different subscales designed to measure three dimensions of perceived social support. These dimensions are; a) appraisal support, b) belonging support, c) tangible support. Each dimension is measured by 4 items on a 4 point scale ranging from "Definitely True" as 4 point, "Probably True" as 3 points, "Probably False" as 2 points, to "Definitely False" as 1 point. Items 1, 2, 7, 8, 11, and 12 are reversed scored. Items 2, 4, 6, 11 make up the appraisal support subscales. Items 1,5,7,9 make up the belonging support subscales while items 3, 8, 10, 12 make up the tangible support subscales. Internal reliability for the ISEL is between, 0.88 and 0.90. Test-retest correlation for the ISEL is .87. The Cronbach Alpha coefficient for the participants are Appraisal support = .64, Belonging support = .79, and Tangible support = .71.

Parental Verbal Abuse Scale

A 22-item questionnaire was designed by the researchers to measure the degree of parental verbal abuse on their wards/children. The instrument is a four point likert type response format ranging from "Strongly Disagree" as 1 point, "Disagree" as 2 points, "Agree" as 3 points, to "Strongly Agree" as 4 points. Sample items include "My parents(s) ridiculously laugh about my past failures in life" and "I always see myself as a failure and never-do-well because of the words my parents use on me". Predictive validity test was conducted to assess the direction of relationship between Parental Verbal Abuse and Verbal Abuse Scale (VAS) by Teicher, Samson, Polcari and McGreenery, (2006). Results showed that the correlation coefficient r



between the two scales is .63. Cronbach Alpha reliability coefficient of .71 was established by the researchers during pilot study. Cronbach Alpha reliability for the Scale of parental verbal abuse is .69.

Procedure

A total of two hundred (200) questionnaires were prepared and distributed within a period of one month. The researchers recruited and trained two research assistants (1 male and 1 female). They took the research instruments to the following hostels (St. Mary's hostel, London hostel, and Emmanuel hostel) on a Friday (a fixed day of compulsory sporting activity) where all the residing students must come out to participate in various sports. Participants who were willing and volunteered to participate in the study were given copies of the research instruments to fill. Out of the total of 200 questionnaires administered, 190 were returned and 187 copies were found to be properly filled and were scored and used for analysis.

RESULTS

Table 1

Zero order correlation coefficient matrix showing parental verbal abuse and social support as correlates of psychological wellbeing

	1	2	3	4	5	6
1 PARENTAL VERBAL ABUSE	1					
2 APPRAISAL SUPPORT	-.22**	1				
3 BELONGING SUPPORT	-.26**	.35**	1			
4 TANGIBLE SUPPORT	-.21**	.47**	.74	1		
5 PSYCHOLOGICAL WELLBEING	-.71**	.33**	.48**	.47**	1	
6 COEFFICIENT OF DETERMINANT (r^2)	.50	.11	.23	.22		

** $P < .01$, * $P < .05$ Bold are relevant coefficient for research hypotheses.

The result shows that parental verbal abuse correlated significantly with psychological wellbeing (see Table 1). Table 1 shows that correlation coefficients is, $r = -.71$, $P < .01$, $r^2 = .50$. By implication parental verbal abuse has negative and significant relationship with psychological wellbeing. However, the coefficient of determinant (r^2), showed that parental verbal abuse has an average effect size (50%).

Secondly, the result also showed that the correlation between the various dimensions of social support (Appraisal support, Belonging support and Tangible support) and psychological wellbeing were significant. Their correlation coefficients with psychological wellbeing were ($r = .33$, $P < .01$, $r^2 = .11$; $r = .48$, $P < .01$, $r^2 = .23$; $r = .47$, $P < .01$, $r^2 = .22$) respectively.

Table II
ANOVA Table of Parental verbal abuse, and variations of social support on psychological wellbeing.

Model	Sum of Squares	df	Mean Square	F	Sig.
1 Regression	30168.85	4	7542.21	74.13	.000 ^b
Residual	18517.31	182	101.74		
Total	48686.16	186			

a. Dependent Variable: PSYCHOLOGICALWELLBEING

b. Predictors: (Constant), PARENTALVERBALABUSE, TANGIBLESUPPORT, APPRAISALSUPPORT, BELONGINGSUPPORT

Table III
Table of Regression Coefficients of Parental verbal abuse, and variations of social support on psychological wellbeing

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1 (Constant)	80.40	5.30		15.16	.000
APPRAISAL SUPPORT	.24	.35	.04	.70	.486
BELONGING SUPPORT	1.27	.51	.17	2.51	.013
TANGIBLE SUPPORT	1.15	.42	.20	2.76	.006
PARENTALVERBAL ABUSE	-.64	.05	-.61	-12.86	.000

a. Dependent Variable: PSYCHOLOGICALWELLBEING

From Tables II and III above, it shows that there is a significant interaction between parental verbal abuse and the dimensions of social support $F(4,186) = 74.13$. Further cursory look at the regression table indicates that Belonging support and Tangible support significantly contributed 17% and 20% in predicting psychological wellbeing among undergraduates respectively, whereas, parental verbal abuse contributed -61% in predicting psychological wellbeing.

DISCUSSION

From the results obtained, the first hypothesis showed a strong negative correlation between parental verbal abuse and psychological wellbeing. This means that the first hypothesis which stated that “there will be a significant relationship between parental verbal abuse and psychological wellbeing” was accepted. This study further says that in the presence of parental verbal abuse, psychological wellbeing will decrease. This implies that exposure to verbal abuse even without physical abuse will have a strong effect on psychological health. This finding highlights the detrimental effects of verbal abuse on mental health, which is often unrecognized. In children, exposure to verbal abuse is associated with more disruptive behavior, greater psychological distress, and poorer social relationship (Edwards, Holden, Felitti, & Anda, 2003). Sowell et al. (1999) showed that verbal abuse had a significant negative correlation with self-confidence and self-esteem. In younger Pakistani women, verbal abuse was associated with an increased prevalent of anxiety and depression (Ali, Rahbar, Naeem, Tareen, Gul, & Samad, 2002). It has been found also that verbal abuse in spousal and long-term relationship can have as great a psychological effect as physical abuse (O’Leary, (1999). Verbal abuse is the infliction of mental anguish through yelling, screaming, threatening, humiliating, infantilizing, or provoking intentional fear. In addition to the direct psychological



effects, abuse may negatively affect the factors that improve psychological well-being (Jaffe, Wolfe, Wilson, & Zak, 1986; Coker, Smith, Thompson, McKeown, Bethea, & Davis, 2002).

The second aim of this study is find out the relationship between social support and psychological wellbeing. This shows that when social support increases, psychological wellbeing will increase also. Considerable controversy has centered on the role of social support in the stress process. Some theorists (Cassel, 1976; Cobb, 1976; Kaplan, Cassel, & Gore, 1977) have argued that support acts only as a resistance factor; that is, support reduces, or buffers, the adverse psychological impacts of exposure to negative life events and/or chronic difficulties, but support has no direct effects upon psychological symptoms when stressful circumstances are absent. Several studies confirm this buffering-only view of social support influences (Turner, 1983). Others (Thoits, 1982a, 1983b, 1984) have argued that lack of social support and changes in support over time are stressors in themselves, and as such ought to have direct influences upon psychological symptomatology, whether or not other stressful circumstances occur. A number of studies now confirm this main-effect view of social support influences (e.g., Andrews, Tennant, Hewson, & Vaillant, 1978; Aneshensel & Frerichs, 1982; Lin, Ensel, Simeone, & Kuo, 1979; Thoits, 1984; Turner, 1981; Williams, Ware, & Donald, 1981).

The third aim is to find out the interaction between parental verbal abuse and social support on psychological wellbeing. The result showed that there was a significant interaction between the parental verbal abuse and social support in predicting psychological wellbeing. Tangible support dimension of social support contributed greatly than belonging support. This indicates that receiving support because of your belongingness affiliation is not enough in predicting psychological wellbeing, rather the quality and measure of material support one receives has greater influence on one's level of psychological wellbeing. This interaction is also a pointer that social support has a cushion effect on parental verbal abuse amongst young people in predicting their psychological wellbeing.

Implications of the Study

The present study has certain implications. Firstly, the outcome of this study will be an informative to parents, counselors and guides on the adverse effect of parental verbal abuse. Parental verbal abuse creates invisible scars. It demoralizes the child and makes him/her afraid of everything that can possibly come from him/her. Victims can't trust the smile of someone they love. This creates insecurity and distrust for people they meet in life. Victims of verbal abuse has difficulty forming conclusions and making decisions, feel or accept that there is something wrong with them on a basic level, doubt their ability to communicate, experience self-doubt, low self confidence, and lose spontaneity and/or enthusiasm. The psychological effects of verbal abuse include: fear and anxiety, depression, stress and PTSD, intrusive memories, memory gap disorder, irritability, anger issues, alcohol and drug abuse, suicide, self-mutilation, and assaultive behaviors.

Life itself has unpleasant events, which may likely weigh an individual down. Every person has a need for people whom they could lean on through these events. Social support helps reduce feelings of isolation, depression, and anxiety. It means having friends and other people, including family, to turn to in times of need or crisis is very helpful because it can provide a strong support system that will strengthen your emotional health. Individuals who experience social support from family, friends, and coworkers are happier. Social support enhances quality of life, and provides a buffer against adverse life events and also reduces the psychological and physiological consequences of adverse effects. Social support is exceptionally important for maintaining good physical and mental health.



Limitation of the study

One of the major limitations is the use of questionnaire method because of its social desirability issue and other possible bias especially non willingness of the participants to fill the questionnaire form as some of them did it haphazardly. This resulted in the discarding of many questionnaires due to incorrect and incomplete filling.

Considering the influence of parental verbal abuse and social support on psychological wellbeing, it is recommended that this study be conducted in different geographical settings to tap into cultural differences and their significant impact if any. We recommend that parents should be enlightened of the effect of these variables on psychological wellbeing. Seminars, workshops, PTA meetings, parents forum should be organized to identify and address the issue of parental verbal abuse at homes and the importance of social support as well. It was found that verbally abused children could end up being verbal abusers. Parents/guidance should be mindful of this and hence more efforts to stop this negative roller circle.

Conclusion

Based on the findings of this study, the researchers are of the view that parental verbal abuse and social support have significant relationship with psychological well being. According to the finding, those who were verbally abused exhibited a negative psychological wellbeing while those who experienced social support showed positive psychological wellbeing. This is imperative in promoting cohesion and harmony in the family which the foundation of every society, because a dysfunctional family tend to produce dysfunctional and unhealthy children psychologically.

**REFERENCES**

- Abenga, E. (2005). Changing self esteem in children and Adolescents. Neitherlands. *Journal of psychology*, 62(1), 26-33.
- Adimbo, A. (2001). *Learning Theory and Personality Dynamics*. Ronald Press. New York.
- Albrecht, T., & Goldsmith, D. J. (2003). Social Support, social networks, and health. In: Thompson, T, Dorsey, A, Miller,K, Parrott, R, editors. *Handbook of Health Communication*. Mahway, N. J: Lawrence Erlbaum Associates.
- Ali, B. S., Rahbar, M.H., Naeem, S., Tareen, A. L., Gul, A.,&Samad, L. (2002). Prevalence of and factors associated with anxiety and depression among women in a lower middle class semi-urban community of Karachi, Pakistan. *Journal of Parkistan Medical Association*, 52(11), 513–517.
- Andrews, G., Tennant, C., Hewson, D. M., &Vaillant, G.E. (1978). Life event stress, social support, coping style, and risk of psychological impairment. *Journal of Nervous and Mental Disease*. 166, 307–316.
- Aneshensel, C. S., & Frerichs, R. R. (1982). Stress, support, and depression: A longitudinal causal model. *Journal of Community Psychology*. 10, 363–376.
- Anderson, K. L. (2002). Perpetrator or victim? Relationships between intimate partner violence and well-being. *Journal of Marriage and Family*, 64 (4), 851-863.
- Bandura, A. (1973). Social learning theory of aggression. In J. F. Knutson (Ed.), *The control of aggression: Implications from basic research*. Chicago: Aldine.
- Bandura, A. (1977). *Social learning theory*. New York: General Learning Press
- Bousha,D. M, &Twentyman, C. T. (1984). Mother-child interaction style in abuse, neglect, and control groups. Naturalistic observations in the home. *Journal of Abnormal Psychology*,93, 106-114.
- Briere, J., & Runtz, M. (1990). Differential adult symptomatology associated with three types of child abuse histories. *Child Abuse & Neglect: The International Journal*, 14, 357-364.
- Cahn, D. (1996). Family Violence from a communication perspective. In D. Cahn & S. Lloyd (Eds), *Family Violence from a communication perspective*. Thousand oaks, CA: Sage. pp. 1-19.
- Cahn, D. (1996). *Family Violence from a communication perspective*. Thousand oaks, CA: Sage.
- Cassel, J. (1976). The contribution of the social environment to host- resistance. *American Journal of Epidemiology*. 104. 107–122.
- Claussen, A.H., and Crittenden, P.M. (1991). Physical and psychological maltreatment: Relations among types of maltreatment. *Child Abuse Negl.* 15:5-18.
- Cobb, S. (1976). Social support as a moderator of life stress. *Psychosomatic Medicine*. 38. 300–314.
- Cohen S., Mermelstein R., Kamarck T., &Hoberman, H.M. (1985). Measuring the functional components of social support. In Sarason, I.G. & Sarason, B.R. (Eds), *Social support: theory, research, and applications*. pp 73-94. The Hague, Netherlands: MartinusNijhoff.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98, 310-357.
- Coker, A. L., Smith, P.H., Thompson, M. P., McKeown, R. E., Bethea, L, &Davis, K. E. (2002). Social support protects against the negative effects of partner violence on mental health. *Journal Women's Health Gender-Based Medicine*, 11(5), 465–476.
- David,H.C. (2002). Maternal Attitudes About Family Life and Child Rearing. *Journal of psychology* 13. 22-39.
- Edwards V. J., Holden G. W., Felitti V. J.,&Anda R. F. (2003). Relationship between multiple forms of childhood maltreatment and adult mental health in community respondents: results from the adverse childhood experiences study. *America Journal of Psychiatry*.160(8),1453–1460.
- Egeland, B. (1999). *Causes and Consequences of child maltreatment: Implications for prevention and intervention*. Key note Child Abuse Action Network & Edmund Muskie School of Public Service, Portland, ME.



- Els, D. A., & De la Rey, R. P. (2006). *South African Journal of Human Resources Management*; 4, 2.
- Helson. R., & Srivastava, S. (2001). *Creative and wise people: Similarities, differences, and how they develop*. Unpublished manuscript
- Jaffe, P., Wolfe, D.A., Wilson, S., & Zak. L.(1986). Emotional and physical health problems of battered women. *Canadian Journal of Psychiatry*, 31(7), 625–629.
- Kaplan, B. H., Cassel, J. C., & Gore, S. (1977). Social support and health. *Medical Care*. 15, 47–58.
- Keyes, C. L. M., Shmotkin, D., Ryff, C. D. (2002). Optimizing well-being: The empirical encounter of two traditions. *Journal of Personality and Social Psychology*, 82, 1007-1022.
- Lin, N., Ensel, W. M., Simeone, R. S., & Kuo, W. (1979). Social support, stressful life events, and illness: A model and empirical test. *Journal of Health and Social Behavior*, 20, 108–119.
- Lyrra, T. M., & Heikkinen, R. L. (2006). Perceived social support and mortality in older people. *Journal of Gerontology Series B: Psychological Science and Sociological Science*, 61, S147-S152.
- MacLeod, A. K., & Moore, R. (2000). *Positive thinking revisited*. Positive Cognitions, well-being.
- MacGeorge, E. L., Gillihan, S. J., Samter, W., & Clark R. A. (2003). Skill deficit or differential motivation? Accounting for sex differences in the provision of emotional support. *Communication Research*, 30, 272-303.
- McMillen, J. C. & Rideout, G. B. (1996). Breaking intergenerational cycles: Theoretical tools for social workers. *Social Service Review*, 70, 378-399.
- Motl, R. W., McAuley, E., Snook, E. M., & Gliottoni, R. C. (2009). Physical activity and quality of life in multiple sclerosis: Intermediary roles of disability, fatigue, mood, pain, self-efficacy and social support. *Psychology, Health and Medicine*, 14 (1), 111-124.
- Myers, J. E., Sweeney, T. J., & Witmer, J. M. (2000). The Wheel of Wellness counseling for wellness: A holistic model for treatment planning. *Journal of Counseling & Development*, 78, 251-266.
- Myers, J. E., Luecht, R., & Sweeney, T. J. (2004). The factor structure of wellness: Reexamining theoretical and empirical models underlying the Wellness Evaluation of Lifestyle (WEL) and the Five Factor Wel. *Measurement & Evaluation in Counselling & Development*, 36, 194-208
- Musa, Yasser (Ed). 2001. Belize City. A Historical Exhibition. Belize City: Museum of Belize.
- Ney, P.G., Moore, C., McPhee, J., & Trought, P. (1986). Child abuse: A study of the child's perspective. *Child Abuse Negl.* 10: 511-518.
- O'Leary, K. D. (1999). Psychological abuse: a variable deserving critical attention in domestic violence. *Violence Vict.* 14 (1), 3–23.
- Patterson, G. R., DeBaryshe, B., & Ramsey, E. (1990). A developmental perspective on antisocial behavior. *American Psychologist*, 44, 329-335. Reprinted In Gauvain, M. & Cole, M. (Eds.), *Reading on the development of children*, 2nd Ed. NY: Freeman. 263-271.
- Pavot, W., & Diener, E. (1993). Review of the satisfaction with life scale. *Psychological Assessment*, 5, 164-172.
- Resick, P. A., & Sweet, J.J. (1979). Child maltreatment intervention: Directions and issues. *Journal of social issues*, 35, 140-160.
- Rohner, R. P., & Rohner, E.C. (1980). Antecedents and consequences of parental rejection. A theory of emotional abuse. *Child abuse and Neglect*, 4, 189-198.
- Roothman, B., Kristen, D. K., & Wissing, M. P. (2003). Gender differences in aspects of psychological well-being. *South African Journal of Psychology*, 33 (4), 212-218.
- Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being', *Journal of Personality and Social Support*, 57, 1069-1081.



- Ryff, C.D., & Keyes, C.L.M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology*, 69, 719-727.
- Schaefer, C., Coyne, J. C., & Lazarus, R. S. (1981). The health-related functions of social support. *Journal of Behavioural Medicine*, 4(4):381-406.
- Seligman, Martin E. P. (2002). *Authentic Happiness: Using the New Positive Psychology to Realize Your Potential for Lasting Fulfilment*. New York, NY: Free Press.
- Skinner, B.F. (1972). *I Have Been Misunderstood. Beyond freedom and dignity*. Psychology Today, March/April Center Magazine, pp. 63–65.
- Solomon, C. R., & Serres, F. (1999). Effects of parental verbal aggression on children's self-esteem and social marks. *Child Abuse & Neglect*, 23(4), 339-351.
- Sowell, R., Seals, B., Moneyham, L., Guillory, J., Mizuno, Y. (1999). Experiences of violence in HIV-seropositive women in the south-eastern United States of America. *Journal of Advanced Nursing*, 30 (3), 606– 615.
- Sugarman, D., Straus M.A., & Giles-Sims, J. (1997). Corporal Punishment by Parents and Subsequent Anti-Social Behavior of Children. *Archives of Pediatrics & Adolescent Medicine*, 151, 761-767.
- Teicher, M.H., Samson, J.A., Polcari, A., & McGrenery, C.E. (2006). Sticks, stones, and hurtful words: relative effects of various forms of childhood maltreatment. *American Journal of Psychiatry*, 163(6), 993-1000.
- Thoits, P. A. (1982a). Conceptual, methodological, and theoretical problems in studying social support as a buffer against life stress. *Journal of Health and Social Behavior*, 23, 145–159.
- Thoits, P. A. (1983b). Main and interactive effects of social support: Response to LaRocca. *Journal of Health and Social Behavior*, 24, 92– 95.
- Thoits, P. A. (1984). Explaining distributions of psychological vulnerability: Lack of social support in the face of life stress. *Social Forces*, 63,(2, 1), 453–481, <https://doi.org/10.1093/sf/63.2.453>
- Turner, R. J. (1981). Social support as a contingency in psychological well-being. *Journal of Health and Social Behavior*, 22, 357–367.
- Turner, R. J. (1983). Direct, indirect, and moderating effects of social support upon psychological distress and associated conditions. In H. B. Kaplan (Ed.), *Psychosocial stress: Trends in theory and research*. New York: Academic Press. Google Scholar
- Vissing, Y., and Baily, W, (1996). Parent – to child verbal aggression. In Cahn, D.D., and Liloyd, S.A. (eds.), *Family Violence From a Communication Perspective*. Sage, Thousand Oaks, CA, 85-107.
- Watson, J.B. (1919). *Psychology from the Standpoint of a Behaviorist*. Philadelphia Lippincott.
- Williams, A. W., Ware, J. E., Jr., & Donald, C. A. (1981). A model of central health, life events, and social supports applicable to general populations. *Journal of Health and Social Behavior*, 22, 324–336.
- Wissing, M. P., & Van Eeden, C. (2002). Empirical clarification of the nature of psychological well-being. *South African Journal of Psychology*, 32, 32-44.